

Sandia Total Health

A member guide on your benefits with a health reimbursement account.

Sandia Total Health

The contents of this booklet are condensed information pieces and do not replace or modify the Summary Plan Descriptions or Program Summaries for the plans. Sandia Corporation's benefits plans are maintained at the discretion of Sandia. They do not create a contract of employment. The plans may be suspended, modified, or discontinued at any time and without prior notice, subject to applicable collective bargaining agreements and except as otherwise provided by applicable law.







Welcome

Dear Sandia employee or pre-Medicare retiree:

You are receiving this guide because you enrolled in Sandia Total Health administered by UnitedHealthcare. In the guide, you will find information on how to access people, resources, and tools to help you when you aren't feeling your best. We also have unique programs to help you improve your health and wellness. Knowledge is the heart of health care, so we want to give you resources to help you:

- ▶ Be active with your health care
- ▶ Make healthy choices
- Find answers
- ▶ Save money
- ▶ Take charge of your health

This guide will help you find exactly what you need, when you need it.

Let's get started.

Please refer to your Summary Plan Description for official details of your benefit plan.

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Additional Benefits

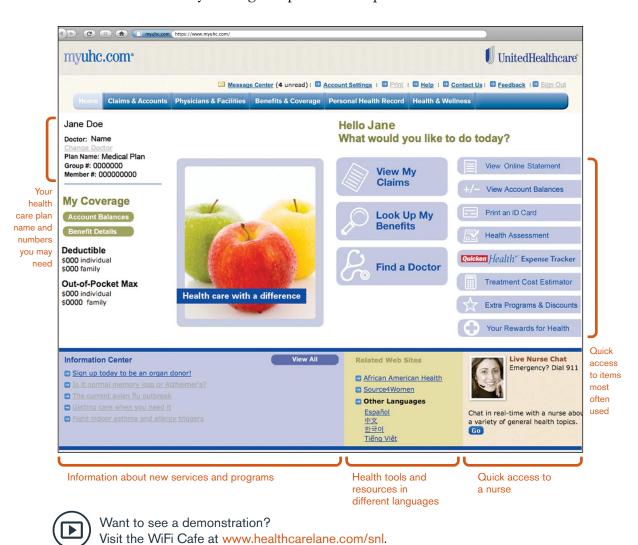
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Getting Started

myuhc.com® - your personal benefit Web site

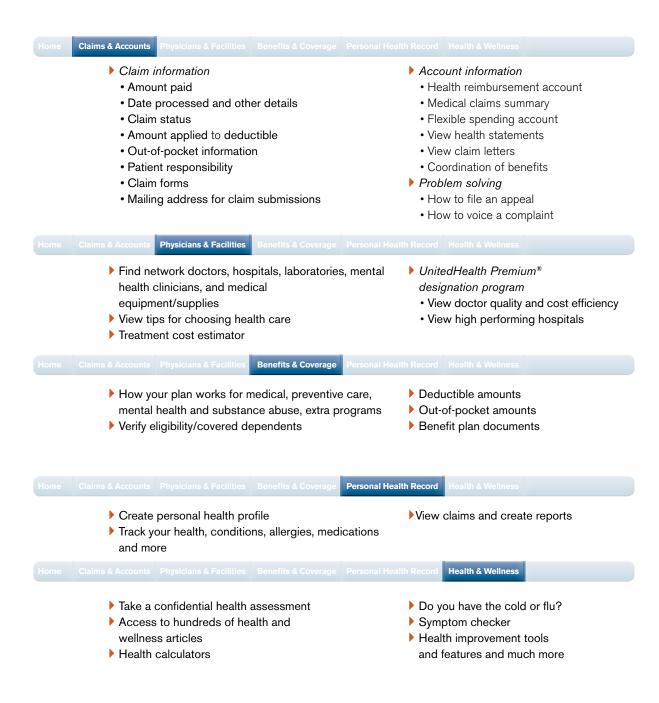
We've created myuhc.com to help you manage your benefits and your personal health. Get easy access to details about your coverage, doctors, health conditions and medical claims by visiting this personal and powerful website.





Don't have access to a computer or need to talk to a Customer Care Professional?

Call the toll-free, member phone number on the back of your ID card.





Important: Outpatient prescription drug benefits are administered by Catalyst Rx.

Visit www.catalystrx.com for more information.

Health plan terms

Health insurance has its own language. We want to make it easier for you to understand. Here are some basic definitions:

Coinsurance: This basically means you and your health plan share expenses. Each of you pays part of the total.

Deductible: The amount you pay out of your own pocket before your insurance pays.

Out-of-pocket costs: These costs are the amounts you pay as your share of your medical costs in a plan. Out-of-pocket costs include deductibles and coinsurance.

Out-of-pocket maximum: The most you would have to pay in a single year out of your own pocket.

Eligible expense: The costs from a doctor's visit or other medical service that meets the requirements of your health care benefits. Refer to your Sandia Total Health Program Summary administered by UnitedHealthcare.

Heatlh care flexible spending account: A benefit plan that lets workers put pre-tax dollars in special accounts to help pay medical costs and other health services.

Health reimbursement account: Health care accounts that employers fund for covered workers or retired persons. The IRS does not tax this money and allows any money left in these accounts at the end of the year to roll over to be used the next year.

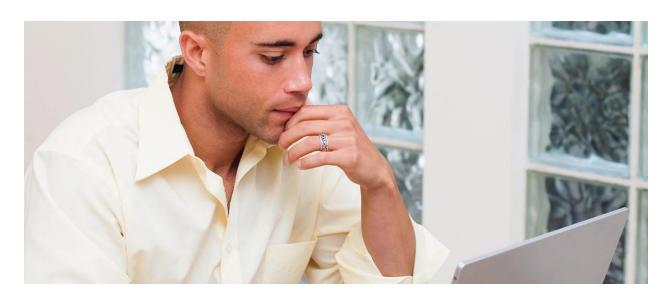
Health statement: This document shows all claims processed in a month for all family members covered on your plan, plus remaining balances for deductibles and out-of-pocket costs. If there are no claims, you will not receive a health statement for that month.

Medical claim form: A form you will need to fill out if you receive care from a doctor who is not in our network. Our network doctors normally take care of claim forms for you.

Network: A list of doctors, hospitals and other health care professionals with whom we have negotiated the best prices.

Preventive care: Health care services that help prevent disease. Flu shots and Pap smears are examples of preventive care.

Primary care provider: This is a doctor who you go to first when you are not feeling well.



Technology terms

e-newsletter: A collection of news stories delivered to you by e-mail or by visiting a Web site. Our Healthy Mind Healthy Body e-newsletter is delivered to you by e-mail and allows you to choose the wellness information that best fits your daily life. (You will find information on page 13 on how to sign-up for this free e-newsletter.)

Evaluation of new technologies: You also should know that we make sure medical technology is safe for you - including new tests and treatments, as well as what's currently available. We continually review scientific evidence about the safety of care.



Using Your Benefits

Understanding Sandia Total Health

A medical plan with an account to help pay your medical and prescription drug expenses Sandia Total Health includes a special account that you can use for health care expenses.

The plan is made up of two parts:

Healthcare Coverage

- In-network preventive care covered at 100%
- Comprehensive medical and prescription drug coverage
- Flexibility of in and out-of network coverage with higher benefits in-network
- Annual deductible and coinsurance provisions
- Out-of-pocket maximum amount to protect you from the expense of possible catastrophic illness or injury.

Health Reimbursement Account

- Sandia contributes money on your behalf to your Health Reimbursement Account if you complete a Health Assessment.
- You can use that contribution to pay for your medical deductible and medical and prescription drug coinsurance.
- Any unused amount in your HRA at the end of the plan year will be rolled over for use next year, up to five times your annual contribution amount.



Want more information on HRAs?

Visit Campbell's Auto Care at www.healthcarelane.com/snl.

Tips for your FSA and HRA

- 1. You can turn off the automatic rollover for FSA/HRA at anytime on myuhc.com (both FSA and HRA will be turned off).
 - **Note:** you will need to file claims manually or you can use your Health Care Spending Card Debit MasterCard[®].
- Use your Health Care Spending Card to purchase outpatient prescription drugs through Catalyst Rx. If you don't use the card you will need to file a claim for reimbursement from your FSA and/or HRA.
- 3. Visit www.SandiaTakeCharge.com for more information on how the FSA/HRA works.

How Sandia Total Health works

Your health expenses are paid by your HRA

- Sandia contributes money to your account each year:
- \$250 Employee \$500 Employee + Spouse or Child(ren) \$750 Family
- * If you did not complete the health assessment by November 30th, your account will have \$250 less.
- If you have a Health Care FSA, your FSA will pay for eligible expenses first before you access your HRA dollars
- Your HRA pays your eligible expenses as long as there are funds in it.
- These payments apply toward your annual medical deductible and medical and prescription drug coinsurance.

After your HRA funds are used up, you pay the rest of your deductible

Your annual deductible is the amount you need to pay before your medical plan pays. The annual in-network deductible is:

• \$750 - Employee • Up to \$1,500 - Employee + Spouse - Up to \$2,250 - Family

The annual out-of -network deductible is:

- \$2000 Employee Up to \$4,000 Employee + Spouse Up to \$6,000 Family
- If you use all of your HRA, you pay the rest of the deductible amount out of your own pocket.
- In-network eligible preventive care is covered up to 100% by the medical plan whether or not you have met your deductible.
- There is a \$750 per person annual maximum deductible in-network.
- Prescription drugs purchased from Catalyst Rx do not apply to your annual deductible.

After your deductible is met, you pay coinsurance

Once you have met your deductible, you and the medical plan share expenses. This is called coinsurance. Your share is:

In-Network

Out-of-Network

20% of eligible expenses 40% of eligible expenses

For your protection, there is a limit on how much you need to pay out of your own pocket. Once you reach the amounts shown below, you are covered 100% of eligible expenses for the rest of the year.

Out of pocket maximum

Employee In: \$2.250

Employee + Spouse or Child(ren) In: \$4,500

Family In: \$6.750

Out: \$6,000

Out: \$12,000

Out: \$18,000

(In = In-Network, Out = Out-of-Network)

- ▶ The out-of-pocket maximums include deductibles.
- There is a \$2,250 per person annual out-of-pocket maximum in-network.
- Prescription drugs purchased through Catalyst Rx have a separate \$1,500 annual in-network per person out-of-pocket maximum.

[&]quot;Employee" referenced in boxes above also includes pre-Medicare retirees.





- 1. Log on to myuhc.com.
- 2. Click "Find a doctor."
- 3. Begin your search by name or location.

UnitedHealthcare Network

- ▶ 606,000 doctors
- ▶ 5,015 hospitals



Finding the right doctor

We can't emphasize enough how important the relationship between you and your doctor is. No matter what kind of coverage you have, when you choose the right doctor – someone you feel comfortable with – you're choosing a partner for good health.

And, because UnitedHealthcare is about helping you to become a **careful** and **educated** consumer, we can provide some helpful tools in your search:

A choice of over 632,000 network doctors and 5,060 hospitals

Search doctors in our network to find the one that has the right experience, credentials, services and fees to meet your needs.

Access to quality and efficiency ratings
Look for a doctor who has received UnitedHealth
Premium® designation. UnitedHealth Premium assesses
doctors and hospital performance against quality and
cost-efficiency criteria.*

Treatment Cost Estimator on myuhc.com
Find out how much you can expect to pay for an office
visit or procedure before you go



Money-saving tip:

Using network doctors usually saves you money. It will cost you more for services you get from doctors that are not in our network. If you seek care outside the network, we only pay a portion of the charges, and you're responsible for paying the remainder. Whenever possible, use network doctors.

To find a network doctor, visit myuhc.com or call the Customer Care number on the back of your medical ID card.

To make sure you're not billed at out-of-network rates for your lab or diagnostic imaging services, tell your doctor that you want to be referred to a network provider.

* The UnitedHealth Premium designation program is intended as a resource for informational purposes only. Designations are displayed in UnitedHealthcare on-line physician directories at myuhc.com. You should always consult myuhc.com for the most current information. Premium designations are a guide to choosing a physician and may be used as one of many factors you consider when choosing the physicians from whom you receive care. If you already have a physician, you may also wish to confer with him or her for advice on selecting other physicians. Physician evaluations have a risk of error and should not be the sole basis for selecting a physician. Please see myuhc.com for detailed program information and methodologies. UnitedHealth Premium may not be available in all geographic locations.

Preparing for your doctor's visit

Before your appointment

Here's a checklist to help you prepare for your medical appointment.

- 1. Bring your member ID card.
- 2. Bring a list of your medications.
- 3. Gather records from any previous visits you've had for a similar problem. It's good background information for your doctor.

Checking in at your appointment

1. Present your member ID card.

When you get to your appointment, present your UnitedHealthcare member ID card at check-in.

Important note: The physician's office should submit a claim to UnitedHealthcare first before you pay anything.

2. Eligible preventive care is 100%.

When you see a network doctor for eligible preventive care services, you don't need to pay. (Be sure to remind your doctor's office staff) This can include routine check-ups, screenings and immunizations. See your benefit plan coverage documents for details.

service or treatment UnitedHealthcare Health Plan (80840) 911-87726 -10 999999876 Group Number: 987654 SPONSOR OR COMPANY NAME SECOND LINE OF SPONSOR NAME Payor ID 87726 Eff Dt: 01/01/09 SUBSCRIBER BROWN

SPOUSE BROWN CHILD A BROWN

CHILD B BROWN CHILD C BROWN

Copay: Office / Spec / ER / URG \$10 / \$50 / \$100 / \$90

1. Log on to myuhc.com.

2. Select "Treatment

3. Select the state and city

Cost Estimators"

4. Select the condition,

How your claim is paid

UnitedHealthcare has specially negotiated rates with network providers. Your doctor's office needs to "bill" UnitedHealthcare first to make sure you get this negotiated price. UnitedHealthcare will pay your doctor directly when medical services are paid by your

EOB is sent to

the provider.

medical plan or you have available funds in your FSA and/or a HRA. Once your claims are processed through your medical plan and FSA/HRA, your doctor will bill you for any amount you owe. You can check the amount paid by the medical plan and your Health Care FSA/HRA at myuhc.com. (Go to page 6 for information on turning off this automatic rollover feature.)

Standard claim process

this time.



For illustration purposes only. Diagram illustrates network benefits.

FSA/HRA balance.



When to use emergency, urgent care or convenience care centers

If you've ever had a child with an ear infection, his or her misery at 2 a.m. may have left you thinking "emergency." But, it's important to know the difference between conditions that require immediate medical attention and those that can be taken care of through a doctor's appointment, urgent care or a trip to a convenience care center.

Okay, it's not an emergency or even urgent.

For routine, primary or preventive care or for non-urgent treatment, we recommend you go to your doctor's office for medical care. Your doctor knows you and your health history, and has access to your medical records. You may also pay the least amount out of pocket when you receive care in your doctor's office.

Care at your convenience.

Sometimes you may not be able to get to your doctor's office, and your condition is not urgent or an emergency. In these situations you may want to go to a Convenience Care Center. Many of these centers are conveniently located in malls, neighborhood retail stores or pharmacies. They offer services without the need for an appointment and the care may be provided at a lower out of pocket cost than urgent care centers. Convenience Care Centers normally treat patients 18 months or older and the services they offer vary per center. Conditions that may be treated at a Convenience Care Center include:

Common infections (such as bronchitis, bladder infections, strep throat)

- Minor skin conditions (such as athlete's foot, cold sores, minor sunburn, poison ivy)
- ▶ Flu shots
- Pregnancy tests

We do recommend, however, that you seek routine medical care from your primary care doctor whenever possible.

In the event of an emergency, call 911 or go to the nearest hospital.

Some examples of emergency conditions may include:

- Heavy bleeding
- ▶ Chest pain
- Sudden weakness or trouble talking
- Difficulty breathing

If you're not sure your symptoms meet the above criteria, call your doctor. If you are sure you need immediate attention, no matter if you're at home or out of town, call 911 or go to an emergency room. And remember, if it's an emergency, you'll be covered at network rates no matter where you go. (You may be transferred to an in-network facility once the condition has stabilized)

Many ailments can be treated at an urgent care center.

An urgent care center can help with:

- Sprains and strains
- ▶ Minor broken bones (example: finger)
- ▶ Small cuts
- Difficulty breathing



Our NurselineSM services give you access to registered nurses to answer your questions. Phone: 1-800-563-0416.

Spanish-speaking nurses and translation for 140 languages are available. If you have hearing impairments, access a nurse through the National Relay Center.

Live well. Your wellness resource guide

There's nothing more important than your health.

UnitedHealthcare is committed to helping you achieve your healthy living goals. So, whether you want to eat right, exercise more, stop smoking, or just relax, our wellness programs can help.

Take a health assessment

Complete a confidential online questionnaire to help determine your overall state of health. Once completed, you will receive an immediate personalized report with suggestions on how to improve your health. These results can be added to your Personal Health Record to help you keep track of your health improvement goals. Just log on to myuhc.com and click on the "Health and Wellness Assessment" section to find out how to take your Health Assessment.

Create a personal health record

Take a great leap in managing your health by using this electronic medical record. You can enter health information related to medical tests and procedures, immunizations, medications and claims. Then use this interactive tool on myuhc.com to track your health and well-being. It's easy to set up your Personal Health Record. Just click on the 5-Step quick start program to show you how.

Get answers from NurselineSM and Wellness Coaches

Talk to registered nurses to answer your questions about health and wellness concerns. There is also an audio library with more than 1,100 health and well-being topics and you can also get help with stress management, smoking cessation and balancing work and home. These professionals can help you:

- ▶ Assess your symptoms
- Plan for a visit to your doctor or hospital

- ▶ Manage high-risk pregnancies
- Manage medication that requires special attention
- Manage chronic diseases such as diabetes, asthma and heart failure

Call the number on the back of your medical ID card to access these services.



You can also get assistance through Live-Nurse Chat

Connect online with a nurse 24 hours a day, 7 days a week

- 1. Log on to myuhc.com
- 2. Select "Live Nurse Chat"

Start with online wellness programs

How ready are you to improve your health and make lifestyle changes? Get help with seven important wellness goals through our online health coaching programs. These 5-week programs cover issues such as fitness, weight loss, nutrition, stress, heart health, diabetes and smoking cessation. You will get help tailored to where you are in your effort to improve your health. These programs offer evidence-based support tools and educational information that you can put to immediate use.



Want more information?

Visit the Fitness Center at www.healthcarelane/snl.

Healthy Mind Healthy Body®

Our Healthy Mind Healthy Body e-newsletter allows you to choose the wellness information that best fits your daily life. We also feature members like you who have improved their health through lifestyle changes and with care provided through our network. Each month we'll send you an e-mail with the newsletter.

A recent survey reported that 90 percent of our members found the newsletters to be helpful in making health decisions.





these timely and inspiring articles. GO

Healthy Body Preference Center. Adjust your e-news preferences today to receive

More stories

Prostate cancer screening: Facts every man should know

HEALTH AND WELLNESS ARTICLES

Savor spices for flavor and good health Stay active with arthritis

Volunteers: Give and ye shall receive Muscles for minors: How strength training give's kids a lift

What members are asking

How many mammograms are covered by my health plan each year?

TAKE ACTION



Source4Women seminar

Join this month's seminar: Eating to prevent and control diabetes.

Tuesday, Nov. 16, 12:30 p.m. ET, 11:30 a.m. CT

Take our monthly poll

How much water should you have each day?

(Important links

- Sign up today by visiting www.uhc.com/myhealthnews.
- You can create your very own monthly health and wellness newsletter. Just check the boxes next to the topics that interest you.







Log on to www.uhc. com/source4women to learn more.

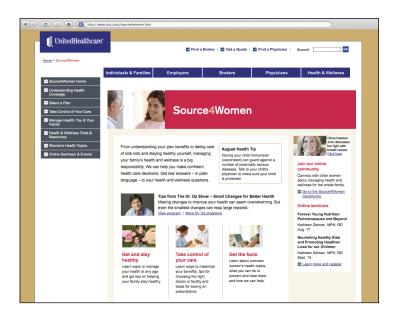
Source4Women sponsors free Web presentations and hosted chats on topics important to women of all ages. Be sure to check the Source4Women website often to view a schedule of events.

Source4Women

Health Care Central for active women and busy moms

Finally there's a single health and wellness resource designed just for women, (but men are welcome too). UnitedHealthcare's Source4Women.com helps you manage your health care, and more importantly, learn how to keep your entire family healthy. It's the one place where you can find out about health benefit plan options, talk to health experts and even connect with women who have similar family or health concerns.

Source4Women helps women make informed health care decisions, proactively manage their family's health care spending, and help keep themselves and their family as healthy and happy as possible.



Care Coordination

Facing a long-term chronic illness or other complex health issue can take a huge toll on you and your family. You may feel overwhelmed trying to find health care information. Care Coordination was designed specifically to ease your worries and assist you every step of the way - so you'll have extra support if you or a loved one has a health issue.



What is Care Coordination?

You will have access to a registered nurse should a health concern arise. The nurse can help you take full advantage of the resources already available to you, tell you about additional services that may be helpful and send you educational information in the mail. Not only that, the nurse will be there to answer questions about any health care concerns and work with you as needed.

What is the purpose of this program?

The purpose is to provide you with help so you'll have added information and support if you or a family member has a chronic condition. It's important that you have the tools and resources you need to take an active role in your health care.

Will this program cost me any money?

No. This program is offered at no additional cost to you and your family.

Does this mean I no longer need to talk to my doctor?

No, none of the services are meant to take the place of your doctor's care. In fact, these programs are meant to support your doctor's instructions.

How do I participate?

Enrolling is easy. If a nurse calls, all you have to do is accept the invitation to join.

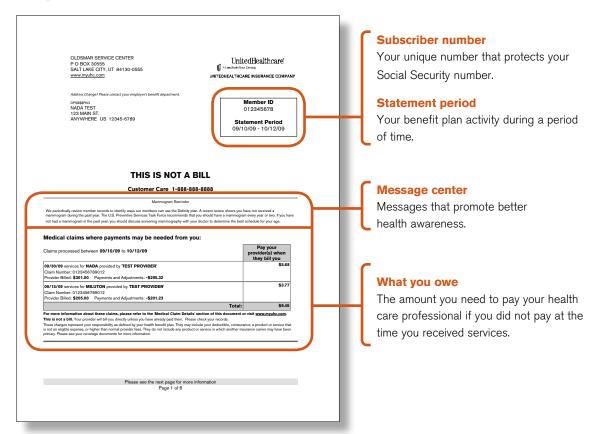
Understanding your health statements

Health statements are mailed to you each month you use your benefit plan. You can see all claims processed for that period, plus remaining balances for your in-network and out-of-network balance information and deductibles. If there are no claims in a month, no statement will be mailed.

You'll have one easy-to-read record of your claims for a more complete view of your health care expenses. And less paperwork means fewer headaches for you and less impact on the environment. If you'd like to go paperless and just receive health statements online, go to myuhc.com and select "Account Settings," then "Mailing Preferences."

You can view your past health statements, Explanation of Benefits or current claims activity at any time of the day or night by logging on to myuhc.com.

Sample health statement





Go Green. Go paperless and just receive health statements online. Just go to myuhc.com and select "Account Settings," then "Mailing Preferences." You can view your past health statements, Explanation of Benefits or current claims activity at any time of the day or night by logging on to myuhc.com.

Quicken Healthsm Expense Tracker

Quicken Health Expense Tracker will display your active claims and break them down so you can see exactly what you owe and why. It also stores your family's medical claim history and provides answers to basic claim questions.

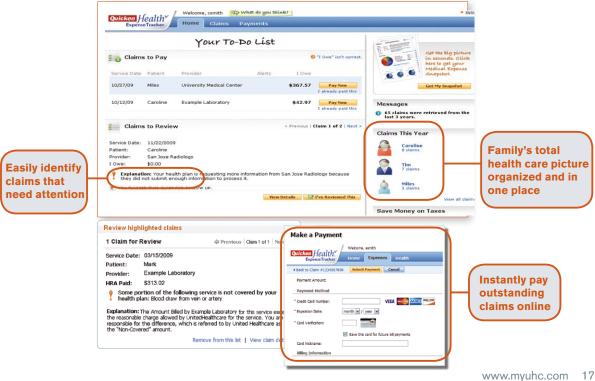
How Quicken Health Expense Tracker helps you

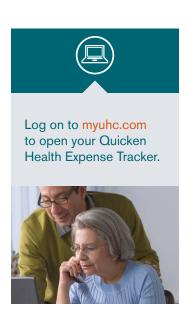
- Automatically downloads and organizes employee and family health care expenses all in one place
- Tracks health care expenses to better estimate future spending or how much to budget
- Instant status for individual and family deductibles and out-of-pocket maximums
- ▶ Simplifies tax time by automatically organizing and tracking total medical expenses
- E-mail alerts when an insurance claim has an outstanding balance or needs other follow-up
- Turns complex medical terms and codes into everyday language
- ▶ Shows exactly what you owe and why
- Explains why a claim needs a follow-up
- Clearly shows how claims are calculated and explains the math

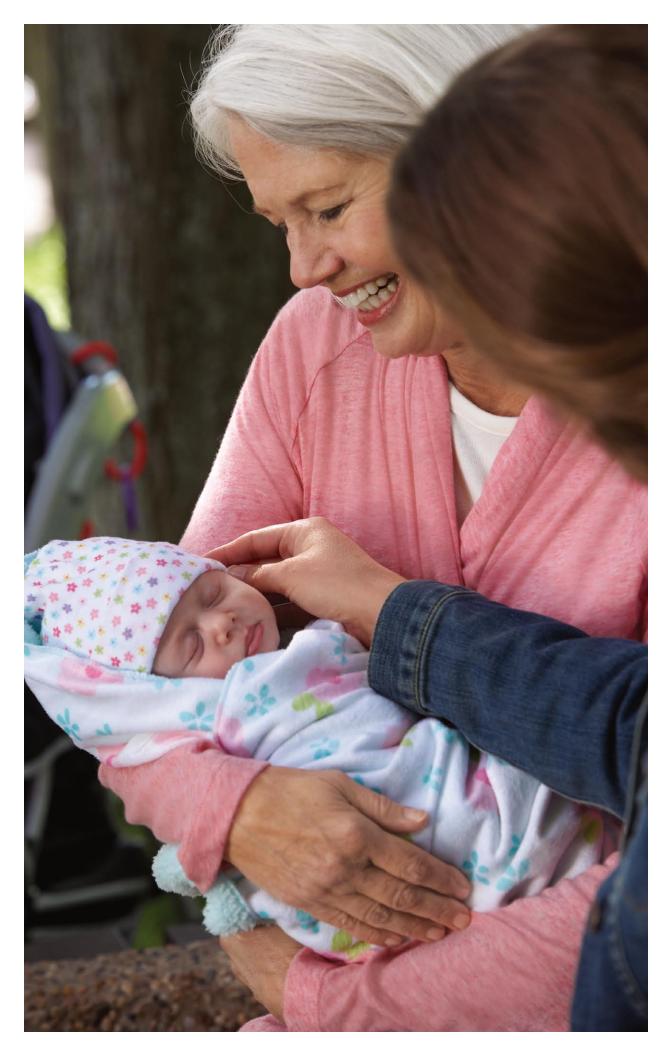
Have a Health Reimbursement Account?

You can:

- Check your balance
- If needed, pay the difference with a few clicks









Additional Benefits

Healthy Pregnancy Program

Get personalized help through pregnancy and delivery.

Whether this is your first pregnancy or you have other children, you need information to make healthy choices. The UnitedHealthcare Healthy Pregnancy Program delivers the support and resources you need - all at no extra charge to you.

Personal attention

When you call our Healthy Pregnancy Program, a care coordinator will fill out a pregnancy assessment with you over the telephone. They'll ask questions about your health, lifestyle and other factors that may affect your pregnancy.

The care coordinator will review your completed assessment and determine if you have special pregnancy needs. If you are identified as having special needs, a nurse will offer to work with you to provide individualized support throughout your pregnancy. We want to give you all the support and resources you need to work closely with your doctor so that you can have a healthy pregnancy and delivery.

Complimentary gifts and savings for you and baby

Enroll in the Healthy Pregnancy Program and you'll receive complimentary gifts for you and your baby.

- Your Journey Through Pregnancy, a book that will help you learn more about your ninemonth journey and offers support for the decisions regarding your care.
- ▶ Two booklets from Johnson & Johnson: Having a Baby Changes Everything and What's Next?: The first days at home with your baby. Each booklet contains money-saving

- coupons for many Johnson & Johnson baby products, including bath and skin products, nursing pads, and infant medications.
- As a Healthy Pregnancy Program member you can receive a discount of ten percent at BarnesandNoble.com by visiting www.bn.com/uhchealthy-pregnancy.com. In addition, an extra five percent discount and free domestic shipping will be applied to orders of \$25 or more.

24-hour help

After you enroll in the program, you can call our maternity nurses 24 hours a day to ask questions or talk over your concerns. Call 1-800-411-7984 whenever you choose. After delivery, many moms still find they need support or answers to their questions. Experienced nurses are available to answer your questions over the phone, even after your baby is born.



To enroll

Call 1-800-411-7984 toll free to enroll. It's best to enroll during the first 12 weeks of your pregnancy but you can enroll whenever you like through your 33rd week of pregnancy.

More information

www.healthy-pregnancy.com



Call for immediate support

To seek support or to find more information about Cancer Resource Services and the Cancer Centers of Excellence network, call 1-866-936-6002 between 7 a.m. and 7 p.m. CST, Monday through Friday.



Cancer Resource Services

Dedicated and highly experienced nurses

Cancer Resource Services (CRS) is pleased to be part of your health care coverage. Through this program, experienced cancer nurses can provide information and help answer your questions. They can also arrange for your access to cancer treatment services or second opinions at a cancer center within the CRS Centers of Excellence network.

Choosing a doctor and cancer center

Cancer Resource Services provides access to the Cancer Centers of Excellence network. Through this network, you have access to top cancer specialists at cancer centers across the country with coverage at your available benefit level with the lowest out-of-pocket cost to you.

Call before you begin receiving care

You may be eligible for reimbursement of travel and lodging expenses when getting care at a cancer center that is part of the Cancer Centers of Excellence network. To make the most of this benefit, you must call Cancer Resource Services before you begin receiving care at a participating cancer center.

Cancer Centers of Excellence network

Cancer Centers of Excellence are nationally respected organizations chosen because of their high quality results. Each center provides care through:

- Specialized teams of clinicians with extensive experience in cancer diagnosis and treatment including complex and rare cancers.
- Second opinion services to confirm a diagnosis or recommend treatment.
- ▶ Experience in performing a large number of cancer surgeries and other complex treatments and procedures.
- Access to newer treatments and clinical trials.

| Notes |
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Evaluation of new technologies - UnitedHealthcare's Medical Technology Assessment Committee reviews clinical evidence that impacts the determination of whether new technology and health services will be covered. The Medical Technology Assessment Committee is composed of Medical Directors with diverse specialties and subspecialties from throughout UnitedHealthcare and its affiliated companies, guest subject matter experts when required, and staff from various relevant areas within UnitedHealthcare. The Committee meets monthly to review published clinical evidence, information from government regulatory agencies and nationally accepted clinical position statements to review new and existing medical technologies and treatments, to assist UnitedHealthcare in making informed coverage decisions.

Insurance coverage provided by or through UnitedHealthcare Insurance Company or its affiliates. Administrative services provided by UnitedHealthcare Insurance Company, United HealthCare Services, Inc. or their affiliates.

Health Plan coverage provided by or through a UnitedHealthcare company.

On topical articles (giving tips and advice to members)

The information and therapeutic approaches in this article are provided for informational and/or educational purposes only. They are not meant to be used in place of professional clinical consultations for individual health needs. Certain treatments may not be covered in some benefit plans. Check your health plan regarding your coverage of services.

The medical centers and programs in UnitedHealthcare's network and within United Resource Networks are independent contractors who render care and treatment to UnitedHealthcare members. UnitedHealthcare does not provide health services or practice medicine. The medical centers and programs are solely responsible for medical judgments and related treatments. UnitedHealthcare is not liable for any act or omission, including negligence, committed by any independent contracted health care professional, medical center or program.

Sandia Total Health Reimbursement Account, or HRA, combines the flexibility of a medical benefit plan with an employer-funded reimbursement account.

The Healthy Pregnancy Program follows national practice standards from the Institute for Clinical Systems Improvement. The Healthy Pregnancy Program can not diagnose problems or recommend specific treatment. The information provided is not a substitute for your doctor's care.

For informational purposes only. The NurseLineSM service can not diagnose problems or recommend specific treatment. The information provided through the NurseLine service is not a substitute for your doctor's care.

UnitedHealth Allies is a program that offers discounts on health products/services to UnitedHealthcare members. It is **NOT** an insurance product but is offered to existing members of certain products underwritten or provided by UnitedHealthcare Insurance Company or its affiliates to encourage their participation in wellness programs. Health care professional availability for certain services may be dependent on licensure, scope of practice restrictions or other requirements in the state. UnitedHealthcare does not endorse or guarantee health products/services available through UnitedHealth Allies. This program may not be available in all states or for all groups. Components subject to change.

For a complete description of the UnitedHealth Premium® designation program, including details on the methodology used, geographic availability, and program limitations, please see myuhc.com®.

UnitedHealth Wellness® is a collection of programs and services offered to UnitedHealthcare enrollees to help them stay healthy. It is not an insurance product but is offered to existing enrollees of certain products underwritten or provided by UnitedHealthcare Insurance Company or its affiliates to encourage their participation in wellness programs. Health care professional availability for certain services may be dependent on licensure, scope of practice restrictions or other requirements in the state. Some UnitedHealth Wellness programs and services may not be available in all states or for all group sizes.



